

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER C C00111278	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eu Services		Date MM / DD / YYYY 10 / 10 / 2006	
Mailing Address P.O. Box 75241		Amount 2728.73	
City Baltimore State MD Zip Code 21275-5241		Transaction ID: E8869CC6D89D84B4CB70	
Purpose of Expenditure H2KY04071 Printing		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Geoff Davis		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3180.38		2006	
Full Name (Last, First, Middle, Initial) of Payee Kdaf-fm		Date MM / DD / YYYY 10 / 12 / 2006	
Mailing Address 7000 Squibb Rd		Amount 4962.30	
City Shawnee Mission State KS Zip Code 66202		Transaction ID: E07CA48E4BE374269A99	
Purpose of Expenditure S2MO00353 Ad		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JAMES MATTHES TALENT		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 82668.29		2006	
(a) SUBTOTAL of Itemized Independent Expenditures		7691.03	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Carol Tobias Signature		Date MM / DD / YYYY 12 / 02 / 2009	